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07/07/2003

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(Signature)
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
00/609 206	10/20/2000	Vachibita Asso	O61449	6062	

TITLE OF INVENTION: ALTERNATOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE	(S) DUE	DATE DUE	
nonprovisional	NO	\$1300	\$0	\$130	0	10/07/2003	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
MULLINS, BURTON S		2834	310-179000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys				
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively, single firm (having as a m attorney or agent) and the	ember a registered	PLLC 2	•	
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered patent attorneys or is listed, no name will be print	agents. If no name	3		

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MITSUBISHI DENKI KABUSHIKI KAISHA

TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be pri	nted on the patent) individual	Corporation or of	her private group entity	☐ government
Marian Issue Fee □ Publication Fee	A check is attached for a Allowance Fees payment. any payment deficiency	Please charge	I fee(s), or credit any o opy of this form).	verpayment, to
Commissioner for Patents is requested to apply the Issue Fee and Publicati	overpayment to POD	and credit A 19-4880	the application identified	ed above.

(Authorized Signature)

Richard C. Turner

Part 10-6.03 Reg. 29,710

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